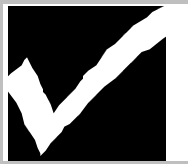


A d d i c t i o n S e v e r i t y I n d e x



C h e c k e r ' s M a n u a l

A Guide to Checking Data Collected with the Addiction Severity Index

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From

U n i v e r s i t y o f P e n n s y l v a n i a / P h i l a d e l p h i a V A M C C e n t e r f o r S t u d i e s o f A d d i c t i o n

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ASI CHECKING MANUAL

Part I: Introduction

The Addiction Severity Index (ASI) is a semi-structured interview which has been used widely for substance abuse treatment planning and evaluation. As with any procedure where judgement is involved, the ASI works most successfully within an environment where a mechanism exists for the individuals administering it to have their work regularly checked for accuracy, consistency and completeness. The purpose of this manual is to provide guidelines for the individuals who are responsible for the integrity of the data collected.

What qualifications are needed to become an ASI checker? The same qualities which make a good ASI interviewer are essential for a good ASI checker. An ASI checker should be familiar with the relationships between individual items within sections and across sections of the instrument. Many of these relationships become apparent only through extensive use of the ASI. Whenever possible, prospective ASI checkers should be selected from a pool of experienced ASI interviewers.

There may be circumstances where it is impossible to assign the job of checking ASI interviews to an experienced interviewer. For example, if an entire treatment program or research center is being introduced to the ASI at one time, all of the individuals within the organization will share the same lack of experience. In cases where no experienced interviewers exist, we recommend a brief pilot phase, in which an individual within a system is designated as the future ASI checker. The checker designee should familiarize himself or herself with as much material as possible about the ASI before the pilot phase. During the pilot phase, the checker designee should administer most of the ASI interviews conducted at the site.

An alternative to a formal pilot phase is one in which two or more individuals of comparable levels of experience work together to increase their ASI skills. We recommend structured exercises designed to stimulate discussion about the finer points of ASI administration and coding. One example of such an exercise would be for interviewers to exchange completed interviews, so that they can discover possible discrepancies in their understandings of how individual items are coded throughout the ASI. As these exercises improve the quality of the work done by a group of interviewers, one or more may be identified as appropriate candidates to assume the formal role of ASI checker.

Time Frame for Checking an ASI Each ASI interview should be checked as soon as possible after its completion. This provides an opportunity for the interviewer to answer any questions while the memory of the interview is still fresh. It may be necessary to schedule some time each day to review completed ASI interviews. We have found it helpful to schedule ASI interviews in the morning, leaving the afternoon for checking the completed interviews and performing other administrative duties. At the very least, completed ASI

interviews should be checked within a week of administration.

Part II. What should be addressed? (The 3 C's)

During a checking session, the checker should discuss with the interviewer any information that seems questionable or incomplete. By combining the numerical codes in the boxes and the written comments, the checker should be able to "read" an ASI back to the interviewer who originally administered it. The ASI checker should concentrate on the following issues (the three C's of ASI checking), to insure that the interview has been efficiently recorded.

Coding: The ASI checker should review the form for completeness (no missing values) and simple coding errors. An individual with only minimal training could probably find most coding errors on a completed ASI interview. For example, sometimes interviewers record a "0" in the general information section, item #6, rather than a "1", if the client has not been in any controlled environment in the past 30 days. This type of coding error is easy to spot and correct.

Consistency: Another type of error an ASI checker should look for is the inconsistency between related items. There are some items on the ASI which should be answered a certain way depending on the responses to other items either within the problem section or across sections. For example, if a client reports during the Legal Status section (item #25), that he has engaged in illegal activities for profit during the past 30 days, then the dollar amount received from the illegal activities should be recorded in Employment/Support Status #17.

In some instances, an apparent inconsistency may be explained by a comment recorded by the ASI interviewer. For example, in the situation just described, the individual engaging in the illegal activity may have actually received no money in the past 30 days (as in the case of an illegal gambler who has not made any money in the past month). A comment recorded by the interviewer could explain why the information in the boxes was correct, although it appeared inconsistent.

Completeness (Comments): The most important bits of information that a checker can use to verify the accuracy of a completed ASI interview are the comments. The information recorded in the comments section should help to qualify the quantifiable data collected in the boxes throughout the ASI. As described above, a checker may have a difficult time judging which, if any, of a number of items should be crossed out because of an apparent inconsistency. A comment may also help the checker to uncover apparent coding errors. A comment can help to clarify whether either a coding or a consistency error exists. An ASI checker should consider an ASI interview with no comments incomplete and therefore, incorrect.

PART III: Sample ASI Sections

On the following page, you will find two samples of ASI sections, which you

can compare to each other. The first column includes comments, whereas the second one includes just the numerical codes. Only when one attempts to "read" an ASI does he or she understand the importance of comments in providing the client's complete story.

While reviewing a completed ASI, the ASI checker should consider the "story" which has been recorded on the ASI. Imagine that a checker was asked to tell a story about the individual interviewed for the ASI which was recorded on the previous page. Given the completed interview, a checker might tell the following story:

Story 1: Mr. Smith has been hospitalized overnight four times in his life. He was hospitalized as a child when he broke his arm playing football. In high school, he was hospitalized for appendicitis. A few years ago, he was stabbed in the side. He spent a day in the emergency room after the stabbing, because it was a deep wound. Two months ago, he spent a day in the hospital because he had severe chest pains. He says that he was on a cocaine binge when the chest pains started. Mr. Smith has chronic allergies which flare up throughout the summer months from May and September. He is prescribed Theodur which he uses regularly during the allergy season. He also has an inhaler which he uses in emergencies. He receives no pension for physical problems. In the past thirty days, he reports no significant medical problems. His allergy medication seems to be controlling his problems. He reports no interest in any additional treatment for medical problems.

Issues that the checker might consider when recording the details in the medical status section, include:.

- (1) the circumstances surrounding the stabbing that was discussed.
- (2) the source of the money to binge.
- (3) the amount of money spent during the binge period.
- (4) the length of the binge period.
- (5) the circumstances surrounding the binge period.

Contrast the minimal information available throughout the Medical status section which includes only the numerical codes. The story told by the checker who has read the incomplete ASI reveals much less about the client, and therefore is less helpful for cross-checking.

Story 2: Mr. Smith has been hospitalized four times. He has a chronic medical problem. He takes prescribed medicine for the problem. He has had no medical problems in the past 30 days. He isn't troubled or bothered by medical problems. He isn't interested in getting treatment for medical problems.

PART IV: What if an error is spotted?

Changing information - It may become necessary during a checking session for the checker to alter data which was collected on the ASI. However, data should not be changed without discussing it with the interviewer who collected it. Each site using the ASI should adopt a standard method for changing incorrect information on the ASI. We have recommended that liquid paper (white-out correction fluid) not be used, because it might appear that data is being falsified. A single pen line through the incorrect response should be used. The correct information should be recorded and initialed on the form beside the crossed-out, incorrect response.

Checkers should resist the temptation to alter information before consulting the interviewer who originally collected it. Below find some examples of responses that appear to be incorrect, with an explanation about what should be done.

Example #1:

Drug/Alcohol Section, Item #22:

How many days in the past 30 have you experienced alcohol problems?

#22=00 (No days of alcohol problems)

Drug/Alcohol Section, Item #23:

How troubled or bothered have you been in the past 30 days by these alcohol problems?

#23=0 (Not at all bothered by alcohol problems)

Drug/Alcohol Section, Item #24:

How important to you now is treatment for these alcohol problems?

#24=3 (Considerably important to get treatment for alcohol problems)

The responses to the three questions are inconsistent. The interviewer recorded that although the client had no alcohol problems in the past 30 days (item #22=0), he reported considerable interest (item #24=3) in treatment for alcohol problems. Therefore, one could assume that either the client or the interviewer misunderstood the response to at least one of the two questions.

For example, perhaps the client felt that the alcohol use was leading him to use other substances. Therefore, he didn't identify the alcohol use as problematic, but reported an interest in treatment.

Maybe the client had been feeling guilty about drinking but didn't think that the interviewer was including guilt this as a problem.

Perhaps the client misunderstood question #24, and feels that although he doesn't have a problem with alcohol, he is willing to be educated about alcohol related problems.

Regardless...because the interviewer did a poor job of clarifying and documenting what occurred during the interview, it made the checker's job difficult.

Therefore, the checker should attempt to contact the interviewer to discuss whether he can provide the checker with any insight any which item (if any) should be changed. If the interviewer can not remember, and the client can not be contacted, **both item #22 and #24 should be crossed out.**

Example 2:

Employment/Support Status, Item #17

How much money did you receive from illegal activity in the past 30?

#17=0000 (No illegal income this month)

Legal #25=10

How many days in the past 30 have you engaged in illegal activities for profit?

#25=10 (10 days of illegal activity)

The responses to these two questions seem inconsistent. A checker might be tempted to immediately cross out item #17 in the Employment/Support section, without checking first with the interviewer. By crossing out item #17, however, the checker is assuming that either the client misled the interviewer or the interviewer didn't listen for inconsistent responses. However, the information may be correct. For example, the client may have earned no money through his illegal activity, such as gambling. The interviewer should have included comments to clarify the apparent inconsistency. The checker should attempt to contact the interviewer to discuss whether he can provide him with any insight into which item (if any) should be changed. If the interviewer can not remember, and the client can not be contacted, **both E/S item #17 and Legal Status item #25 should be crossed out.**

Example 3:

General Information #6, #7

Have you been in a controlled environment in the past 30 days?

How many days?

#6=2, #7=10 (Ten days in jail this month)

Drug/Alcohol Use #8, past 30 days

How many days in the past 30 have you used cocaine?

#8 (Past 30 Days)=30

The responses to these two questions seem inconsistent. A checker might incorrectly consider reducing the number of days of cocaine use to "20" without consulting with the interviewer, because the patient reported ten days in a controlled environment. If drugs were used on all thirty days, the interviewer should have documented the information concerning the drug use, so that the checker knew not to cross out either item.

PART V: Focal Points for Checking an ASI

General Information

Some of the information gathered throughout the general information section can be used to verify other information collected throughout the rest of the interview. For example, the client's years of alcohol or drug use should not exceed his age. In addition, as noted below, the controlled environment question has implications for information gathered throughout the rest of the interview.

6. Have you been in a controlled environment in the past 30 days?

7. How many days?

The number of days that the client stayed in a controlled environment should be accounted for throughout the rest of the interview. For example, if the client spent ten days in jail in the past 30, there should be twenty days or less of substance abuse in the past thirty days. The interviewer should include a note to explain the circumstances surrounding the time spent in a controlled environment that overlaps with the time in which a client used a substance.

Medical Status

The ASI checker should pay particular attention to the comments recorded throughout the medical status section. These comments may be used to verify information gathered in the other six problem sections. For each item listed below, note the section and the item number which may be cross-referenced.

1. How many times have you been hospitalized for medical problems?

Details of hospitalizations could reveal information concerning:

- a.) chronic medical problems, (Medical Status #3, possibly).
- b.) overdoses, which could appear in Drug/Alcohol Use #17.
- c.) car accidents, which might also be referred to in the Legal Status section (major driving violations, driving while intoxicated).
- d.) substance abuse (chest pains from using cocaine, chronic pain which may have led to opiate abuse, organ damage due to alcohol use, abscesses due to needle use, nasal problems from snorting cocaine, lung problems from smoking).
- e.) an injury which warrants a pension through a job or the military service, which would also appear in Medical Status #5.
- f.) violent activity, which might also be referred to in: Legal Status #10(assaults), #16 (disorderly conduct), F/S Relationships #19A-(serious conflicts), F/S Relationships 10-18 (serious problems), or Psychiatric Status #4-(anxiety), #7(violent behavior).

3. Do you have a chronic medical problem which continues to interfere with your life?

4. Are you taking any prescribed medication on a regular basis for a physical problem?

Details of chronic medical problems could reveal information concerning:

- a.) recent medical problems, which might appear in Medical Status #6.
- b.) prescribed meds, which should be recorded in Medical Status #4.

5. Do you receive a pension for a physical disability?

Details of pension could reveal information concerning:

a.) chronic medical problems, which should be recorded in Medical Status #3.

b.) a dollar amount received through the pension, which should be recorded in Employment/Support Status #15.

6. How many days have you experienced medical problems in the past 30?

If #6=00, then Medical Status #s 7 and 8 should be coded 0 also.

In most cases, if #6>00, then #s 7 and 8 should be greater than 0 also.

Employment/Support Status

Within this section, an ASI checker should focus on comparing the amount of financial support that the client reports receiving, to their other statements about financial support made throughout the interview.

4. Do you have a valid driver's license?

- If 4=0, then #5 should be coded 0, also.

6. How long was your longest full-time job?

Details of the patient's last job could reveal information concerning #10, the patient's usual employment pattern.

8. Does someone contribute to your support in any way?

- If #8 =0, then #9 should be coded "N".

Details of regular contributions could reveal information concerning:

a.) the client's living situation, which is also explored in General Information, #s 1 and 2, and Family/Social Status #s 4 and 5.

b.) the amount of money received by the client's mate, family or friends in the past 30 days, which is recorded in E/S Status, #16.

9. Does this constitute the majority if your support?

If Employment/Support #8=0, then 9 =N

10. Usual employment pattern, past 3 years

Details of the client's usual employment pattern might reveal information concerning:

- a.) his or her longest full time job, which is recorded in E/S Status #6.

11. How many days were you paid for working in the past 30?

If Employment/Support Status #11=00, then #12 should be 00 also.

12-17. How much money did you receive from the following sources in the past 30 days?

In most cases, the amount of money recorded in Employment/Support status item #s 12-17 should exceed the amount of money that the client reports spending for drugs and alcohol in the past 30 days. Discussion of illegal income (as recorded in # 17) could reveal information which might also appear in the Legal Status, item #25 (number of days that the client engaged in illegal activity in the past 30).

18. How many people depend on you for the majority of their support?

Details concerning dependents could reveal information regarding:

- a.) marital status (Family/Social Status section, #s 1, 2 and 3).
- b.) usual or current living arrangements, (Family/Social Status section, #s 4, 5 and 6).
- c.) serious problems with relationships (Family/Social Status section, #s 10 through 18).

19. How many days have you experienced employment problems?

Details of recent employment problems could reveal information about:

- a.) recent substance use, as recorded in the D/A Use section, #s 1-13)

If E/S Status #11=00 and #19=00, then 20 should be coded 0

Drug/Alcohol Use

The checker should focus on whether the years of substance use reported in the drug "grid" (Item #s 1-12) conflict with any periods of abstinence reported in the middle column of the section (Item #s. 15-16) or elsewhere on the interview..

1-12: Drug and Alcohol Use *Past 30 Days*.

Details of recent substance use could reveal information concerning:

- a.) Drug/Alcohol #20, (amount of money spent on daily substance abuse multiplied by the number of days substances are used.)
- b.) Consequences of the use (for example, number of days missed at work which might be recorded in Employment/Support Status #19.)
- c.) Drug/Alcohol #13, a record of the number of days in which the client used more than one substance per day.

1-12: Drug and Alcohol Use, *Lifetime Use*

Details of lifetime substance use could reveal information concerning:

- a.) Periods of abstinence, which might be recorded in D/A status #15.

1-12: Drug and Alcohol Use, *Route of Administration*

Information about the route of administration might uncover possible reasons for medical problems. (HIV, hepatitis, abscesses might be related to needle use; Nasal problems may be related to snorting; breathing difficulties may be related to smoking).

15. How long was your last period of voluntary abstinence from this major substance?

16. How many months ago did this abstinence end?

Details of voluntary abstinence could reveal information concerning:

- a.) Treatment experiences, which could appear in the drug/alcohol section or the psychiatric section.

17. How many times have you had alcohol d.t.s/overdosed on drugs?

Details of overdoses could reveal information concerning:

- a.) Hospitalizations, which could appear in the medical section

20. How much would you say you spent during the past 30 days on alcohol/drugs?

Details of the money spent on alcohol or drugs could reveal information concerning:

- a.) recent substance use, which should be recorded in D/A #s 1-13.

22. How many days in the past 30 have you experienced alcohol problems/
drug problems

If Alcohol # 22=00, then both #23 and #24 should be 00.

If Drug # 22=00, then both #23 and #24 should be 00.

Legal Status

Check primarily for consistency within the Legal Status section, not across other sections. For example, if a client reports being convicted of an offense (Item #15>0), then the offense should be recorded in either 3-14C or 16-18.

1. Was this admission prompted or suggested by the criminal justice system?

2. Are you on probation or parole?

Details of the client's probation should be included in the appropriate places throughout the Legal Status section (For example, the original offense for which the client was arrested and charged should be recorded in the list from Legal Status item #s 3-14C, and the conviction should be included in item #15).

3-14. How many times have you been arrested and charged with the following?

Details of each of these charges could reveal information that should appear throughout the Legal Status section. For example, the number of charges which became convictions should appear in Legal Status section item #15. The details about the time that the client spent in prison should be recorded in Legal Status section item #s 19 through 21.

15. How many of these charges resulted in convictions?

Details of each of these convictions could reveal information that should appear throughout rest of the Legal Status section. For example, the details about the time that the client spent in prison should be recorded in Legal Status section item #s 19 through 21.

How many times have you been charged with the following?

16. Disorderly conduct, vagrancy, public intoxication

17. Driving while intoxicated

18. Major driving violations

Information concerning these charges might appear in the drug/alcohol section (alcohol related brawls, disorderly conduct, drunk driving charges). Related charges might show up in the legal status items 3-14 (assault). Social problems due to assaultive behavior may appear in the family/social section.

19. How many months were you incarcerated in your life?

Periods of incarceration over a month should be accounted for throughout the rest of the interview. Generally, long periods of drug use should not overlap with long periods of incarcerations. A record of long periods of jail time in which a client reports drug use occurring should be accompanied by a explanatory note.

20. How long was your last incarceration?

Item #20 is a subset of item #19. Therefore, the response to item #20 should always be shorter than the response to #19. If #19=00, then item #20=NN.

Periods of incarceration over a month should be accounted for throughout the rest of the interview. Generally, long periods of drug use should not overlap with long periods of incarcerations. A record of long periods of jail time in which a client reports drug use occurring should be accompanied by a explanatory note.

21. What was it for?

Conviction for which the client spent time in jail should appear in the Legal Status section grid (item #s 3-14C). In addition, the conviction should be accounted for in the Legal Status item #15.

22. Are you presently awaiting charges, trial or sentence?

23. What for:

24. How many days in the past 30 were you detained or incarcerated?

Periods of 24 hours or more in which the client was incarcerated should appear on the front page, questions 6 and 7.

25. How many days in the past 30 have you engaged in illegal activities for profit?

If information regarding illegal activities is revealed here, an amount of money may be recorded in Employment/Support #17.

26. How serious do you feel your present legal problems are?

27. How important to you now is counseling or referral for these legal problems?

These question should be coded "0" unless current legal problem exists.

Family History

Responses to the Family/History section are difficult to cross-check with other items on the ASI. When checking an ASI, the Family/History section should be reviewed for coding errors.

Family/Social Status

The ASI checker should focus on consistency within the Family/Social status section, as well as between the Family/Social section and other sections. Relationships that are described as problematic in one part of the Family/Social section should be described similarly throughout the section. Descriptions about marital status and living arrangements should be cross-referenced with other sections. In some case, violent behavior and familial substance abuse described in other sections should also appear in the Family/Social section.

1. Marital Status:

2. How long have you been in this marital status?

3. Are you satisfied with this situation?

Information about marital status should confirm the information recorded in the Employment/Support section about the types of financial support available to the client. For example, if the client reports during the general information section that his wife works, then information in this section regarding his marital status should confirm that he is married.

4. Usual living arrangements?

5. How long have you lived in these arrangements?

6. Are you satisfied with these living arrangements?

6 A&B. Do you live with anyone who has a current alcohol problem/uses non-prescribed drugs?

Information about the client's usual living arrangements should confirm the information recorded throughout the Employment/Support section about the types of financial support available to the client.

10-18. Have you had significant periods in which you have experienced serious problems getting along with...?

Review the "Past 30 Days" column of the grid to insure that the individuals who the patient reports having problems with in the past 30 days have had contact with him. For example, if the interviewer has recorded that the patient has had recent problems with co-workers, then information elsewhere in the interview should verify that he is currently working.

19. How many days in the past 30 have you had serious conflicts?

A series of conflicts identified here may also be recorded in #s 10-18 .

How troubled or bothered have you been in the past 30 days by:

20. family problems?

21. social problems

How important for you now is counseling for these:

22. family problems?

23. social problems

A problem rated in #20-23 as troublesome should be identified somewhere else in the section (either item #3, 6, 6A, 6B, 8, 9, 9A, 10-18, 18A-C, or 19).

Psychiatric Status

Information documented in the psychiatric section may support other information gathered throughout the ASI. For example, prescribed Valium reported in the Drug/Alcohol section should be documented here. also. In addition, extreme symptoms (violence, suicide attempts) which were uncovered in other sections should also be included here. Therefore, a checker may want to review the rest of the interview to see if information collected in the Psychiatric section is cross-referenced appropriately elsewhere.

1. How many times have you been treated for any psychological or emotional problems?

Details regarding the treatment for psychological or emotional problems could reveal information concerning the specific psychological problem (recorded in Item #s 3-14) or the period in which the treatment was to have taken place.

2. Do you receive a pension for a psychiatric disability?

The dollar amount of the pension received should be recorded in E/S status #15.

3-10. Have you had a significant period, (that was not a direct result of drug/alcohol use) in which you have...?

7. Experienced trouble controlling: violent behavior (or losing control) rage, or violence.

Details regarding violent behavior could reveal information which could appear in the legal status sections (assaults, perhaps), or the family/social section (serious conflicts with other people)

10. Been prescribed medication for any psychological/emotional problem?

Prescribed medicine should count in the Drug/Alcohol section, if it has any abuse potential (e.g. Valium, Xanax)

11. How many days in the past 30 have you experienced these psychological or emotional problems?

If #11=0, then #12 and #13 should = 0.